PTO/SB/21 (12-07)

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TRANSMITTAL FORM

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Application Number	10/539,082	
Filing Date	December 16, 2005	
First Named Inventor	James M. Swanson	
Group Art Unit	1634	
Examiner Name	Jeanine Anne Goldberg	
Attorney Docket Number	r 121-000910US	

Total Number of Pages in This Subm	ission 5	Attorney Docket Numbe	r	121-000910US
ENCLOSURES (check all that apply)				
X Fee Transmittal Form	X PTO-14	149 Form		Interview Summary
Fee Attached	X 2 Refe	rences		Request for Continued Examination (RCE)
Amendment / Response	Соруо	f PCT Search Report		Request for Corrected Filing receipt
Amendment and Request for Reconsideration	Сору	f EP Search Report		Copy of Filing Receipt –
Affidavits/declaration(s)	CD, No	umber of CD(s)		Status Letter
Extension of Time Request	Power of Change Address	f Attorney, Revocation of Correspondence		Additional Enclosure(s) (please identify below):
Receipt Acknowledgement Postcard		I Disclaimer		
X Information Disclosure Statement		ntity Statement t for Refund		
Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application	Authorization to Please charge D this paper or dur	o Charge Deposit Account eposit Account No. 50-0893	for any a ication,	additional fees associated with including any extensions of time
Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm or Individual name	Quine, Reg. N	o. 41,261, Quine Intelle	ctual I	Property Law Group, P.C.
Signature	Alı	Qui		
Date October 23, 200	8			
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Typed or printed name	Deborah Barragan			
Signature	Pall Bayreen	Date	October 23, 2008	
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PTO/SB/17 (10-07) Approved for use through 06/30/2010. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/539,082 Application Number TRANSMITTAL **International Filing Date:** Filing Date For FY 2008 James M. Swanson First Named Inventor Jeanine Anne Goldberg **Examiner Name** $oxed{X}$ Applicant claims small entity status. See 37CFR 1.27 Art Unit 1634 TOTAL AMOUNT OF PAYMENT 180.00 121-000910US Attorney Docket No. METHOD OF PAYMENT (check all that apply) None X Other (please identify): Deposit Account Check Credit Card Money Order Quine Intellectual Property Law Group, P.C. $X\mid$ Deposit Account Deposit Account Number: 50-0893 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X | Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity Application Type Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 330 165 110 540 270 220 100 Design 50 220 110 140 70 Plant 330 220 110 165 170 85 Reissue 330 165 540 270 650 325 Provisional 220 110 0 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 210 105 Multiple dependent claims 370 185 Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims _ - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee Paid (\$) _ - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) ___ / 50 = _ (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Other: Submission of Information Disclosure Statement 180.00 Other: _

Other:			******
Other:			
Other:			
SUBMITTED BY A			
Signature	ato Al Ch	Registration No. (Attorney/Agent) 41,261	Telephone
Name (Print/Type)	Jonathan Alan Quine		Date October 23, 2008



CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

on _____October 23, 2008_

QUINE INTELLECTUAL PROPERTY LAW GROUP, P.C.

Deborah Barragan

Appl. No.

10/539,082

Confirmation No. 9216

Applicant

James M. Swanson, et al.

371 Filing Date:

December 16, 2005

TC/A.U.

1634

Examiner

Jeanine Anne Goldberg

Docket No. :

121-000910US

Customer No.:

22798

Client Ref No.:

2003-282-2

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT UNDER 37 CFR § 1.97 and § 1.98

Sir:

The references cited on attached form PTO-1449 are being called to the attention of the Examiner. Copies of the references are enclosed. It is respectfully requested that the cited information be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed after the mailing date of the first Office Action and more than three months after the filing date, but prior to the Notice of Allowance or Final Office Action.

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Please deduct \$180.00, pursuant to 37 CFR §1.17(p), from the undersigned's Deposit Account No. 50-0893. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

Jonathan Alan Quine, J.D., Ph.D. Reg. No. 41,261

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